

# STATEMENT OF ECONOMIC INTERESTS OF Our Official Uses Only

2912 TOTAL AND CO 54

### COVER PAGE

Please	e type or print in ink.		2 F 4 C			
NAME C	OF FILER (LAST)		(FIRST)	(MIDDLE)		
Jord	an	Hallye		D.		
1. Of	fice, Agency, or Court					
Ag	ency Name					
St	tate Controller's Office					
Div	rision, Board, Department, District, if applicable		Your Position			
			Deputy Controller for Con	mmunications		
<b>&gt;</b>	If filing for multiple positions, list below or on an a	ttachment.				
Ag	ency:		Position:			
2. Ju	irisdiction of Office (Check at least one	box)		· · · · · · · · · · · · · · · · · · ·		
	State		☐ Judge or Court Commissioner (	Statewide Jurisdiction)		
	Multi-County			,		
	·		<u> </u>			
	City of		Other			
3. Ty	pe of Statement (Check at least one box)		11112111	<u></u>		
	Annual: The period covered is January 1, 2012		Leaving Office: Date Left			
	December 31, 2012.		(Check one)			
	The period covered is	, through	<ul> <li>The period covered is Janu leaving office.</li> </ul>	ary 1, 2012, through the date of		
	Assuming Office: Date assumed/_	<i></i>	The period covered is the date of leaving office.	_/, through		
	Candidate: Election year	and office sought, if differen	nt than Part 1:			
4. Sc	hedule Summary		ADDRESS OF THE STATE OF THE STA	The second secon		
	eck applicable schedules or "None."	► Total num	ber of pages including this	cover page: 4		
7	Schedule A-1 - Investments - schedule attached			iness Positions – schedule attached		
	Schedule A-2 - Investments - schedule attached		hedule D - Income - Gifts - sched			
	Schedule B - Real Property - schedule attached	<del>-</del>	hedule E - Income – Gifts – Trave			
None - No reportable interests on any schedule						
5. Ver	ification					
	ING ADDRESS STREET iness or Agency Address Recommended - Public Document)	CITY	STATE	ZIP CODE		
	0 Capitol Mall, Suite 1850	Sacramento	CA	95814		
	TIME TELEPHONE NUMBER		ADDRESS (OPTIONAL)			
( 9	916 ) 445-2636	hjor	dan@sco.ca.gov			
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contain herein and in any attached schedules is true and complete. I acknowledge this is a public document.						
	rtify under penalty of perjury under the laws of			et		
Date Signed Signature						
Date	Signed (nonth, day, year)	Signatur	e			



## SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700	
FAIR POLITICAL PRACTICES COMMISSION	
Name	
Hallye Jordan	

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
TULCOMMUNICATIONS	
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or Marc (Report on Schedule C)  IF APPLICABLE, LIST DATE:	○ Income Received of \$500 or More (Report on Schedule C)  IF APPLICABLE, LIST DATE:
/	
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000  \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other(Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 12 / / 12 ACQUIRED DISPOSED	/
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000  \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE  \$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other (Outsite)	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	(Doscribe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//	/
Comments:	•

## **SCHEDULE A-1 Investments**

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700	
FAIR POLITICAL PRACTICES COMMISSION	
Name Hally I odun	

NAME OF BUSINESS ENTRY  GENERAL DESCRIPTION OF BUSINESS ACTIVITY   **PUTCH**  GENERAL DESCRIPTION OF BUSINESS ACTIVITY  **PUTCH**  FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT  Stock  Other  (Describe)  Partnership O Income Received of \$0 - \$499  O Income Received of \$500 or More (Report on Schedule C)  IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE  \$2,000 - \$10,000
/	/
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY  OVACLE  GENERAL DESCRIPTION OF BUSINESS ACTIVITY  +
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)  IF APPLICABLE, LIST DATE:	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)  IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY  MICY D SOFT  GENERAL DESCRIPTION OF BUSINESS ACTIVITY  TAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000	► NAME OF BUSINESS ENTITY
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	//_12//
Comments:	•

# SCO-PERSONNER

## **SCHEDULE A-1** Investments

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

tallyc Jordan

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

Calloway	COCA · COLA
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Sports murchand ( e  FAIR MARKET VALUE  \$\$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 • \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY  GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY  SUMMER ELLC TO C  GENERAL DESCRIPTION OF BUSINESS ACTIVITY
energy	ENVSM
FAIR MARKET VALUE  \$2,000 - \$10,000  \$100,001 - \$1,000,000  Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY  OVALE  GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY  HWWH-PACKAM  GENERAL DESCRIPTION OF BUSINESS ACTIVITY
HLAUHUCAVL  FAIR MARKET VALUE  \$2,000 - \$10,000 \$\infty\$ \$10,001 - \$100,000	TECHNOLO SY)  FAIR MARKET VALUE  \$\Begin{array} \text{\$\frac{1}{2},000} & \text{\$\frac{1}{2},000} & \text{\$\frac{1}{2},000} \end{array}
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	/
Comments:	